

State of Utah
Water Operator Certification Program
RECIPROCITY APPLICATION



Click here to
pay online

Instructions:

All applicants must meet the requirements set forth by the Operator Certification Commission in order to qualify for reciprocity from another state. Reciprocity is reviewed on a case-by-case basis. Please contact Kim Dyches at (801) 536-4202 for qualifications.

1. Fill out both sides of this form. Attach copies of other state certification documentation for consideration.
2. A reciprocity fee of \$100.00 per certificate is required at the time of application.
3. Make check or money order payable to the Division of Drinking Water and label it "Reciprocity." Or you may now pay online at <http://drinkingwater.utah.gov>.

Date: _____

(print clearly)

Name: _____

Social Security Number: _____ Birth Date: _____

Home mailing address: _____

City/State: _____ Zip Code: _____

Home Telephone: _____ Fax Number: _____

State in which you are currently certified: _____

Present Employer/Water System: _____ Business phone: _____

Employer's Address: _____

CIRCLE THE TYPE OF CERTIFICATE CURRENTLY HELD

Water Distribution

1 2 3 4

Water Treatment

1 2 3 4

WORK EXPERIENCE

Current employer: _____

Job title with current employer: _____

Duties of position: _____

Total years in this position:_____ Total years with this employer:_____

Are you now a *Direct Responsible Charge (DRC) Operator? Yes ☐ No ☐ If yes, how many years ? _____

**DRC Operator - DRC means active daily on-site charge and performance of operation duties. The person in direct responsible charge is generally an individual who independently makes decisions during normal operation, which can affect the sanitary quality, safety, and adequacy of water delivered to customers. In cases where only one operator is employed by the system, this operator shall be considered to be in direct responsible charge. In cases where more than one operator is employed, more than one operator may be in direct responsible charge.*

List other water-related licenses held (such as a plumber's license, cross connection certification, etc.):

Note: If you have additional water-related experience with other employers, duplicate the above section and complete it for those employers.

EDUCATION

What is the highest level of education you have completed?

Grade School _____ High School _____

College Graduate:

Associate (2-year degree)	Major _____	Year _____
Bachelor (4-year degree)	Major _____	Year _____
Master (post graduate)	Major _____	Year _____
Doctorate	Major _____	Year _____

RETURN THIS APPLICATION AND \$100.00 FEE TO:

Division of Drinking Water
Operator Certification Program
150 North 1950 West
P.O. Box 144830
Salt Lake City, Utah 84114-4830
Telephone: (801) 536-4200
Fax: (801) 536-4211



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NEED ASSISTANCE? CONTACT:

Kim Dyches
Telephone: (801) 536-4202
E-mail: kdyches@utah.gov

Margaret Hand
Telephone: (801) 536-4192
E-mail: mhand@utah.gov

Office Use Only

	<i>Date</i>	<i>Name</i>	<i>Amount</i>	<i>Check/Money Order/Receipt Number</i>
<i>Reciprocity fee received</i>				
<i>Computer updated</i>				
<i>Certificate printed</i>				
<i>Certificate mailed</i>				